

BEST AVAILABLE COPY

<b>CLAIMS ONLY</b>						SERIAL NO.	FILING DATE	
						APPLICANT(S)		
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1							
2		1						
3		1						
4		1						
5	1							
6		1						
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9	1							
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50								
TOTAL IND.	6		↓		↓		↓	
TOTAL DEP.	18	←	←	←	←	←	←	←
TOTAL CLAIMS	24							

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS